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PTO/SB/05 (11-00) through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION **TRANSMITTAL**

821937600001 Attorney Docket No. Tam, et al. First Inventor

A Unified Distributed Architecture for a Multi-Point Video Conference and Interactive Broadcast Systems

F1.711876367US

(Only for new nonprovision	nal applications under 37 CFR 1.53(b)) <u> </u>	xpress Mail Label No. 1117 1107 0307 08			
APPLICATION ELEMENTS			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application			
See MPEP chapter 600 cond	cerning utility patent application conte	Washington, DC 20231				
1. X Fee Transmittal F (Submit an original and a Applicant claims s See 37 CFR 1.27 Specification (preferred arrangemen - Descriptive title - Cross Referenc - Statement Reg Reference to se or a computer p - Background of - Brief Summary - Brief Descriptio	orm (e.g., PTO/SB/17) duplicate for fee processing) mall entity status. [Total Pages 27] I set forth below) of the invention e to Related Applications arding Fed sponsored R & D equence listing, a table, brogram listing appendix the Invention of the Invention n of the Drawings (if filed)	nts.	7. CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s			
- Abstract of the	Disclosure		10	1		
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City	Cleveland State Ohio Zip Code 44114					
Country	US	Teleph	none (216) 586–3939 Fax (216) 579–	0212		
Name (Print/Type)	David B. Cochran		Registration No. (Attorney/Agent) 39,142	$\overline{\ \ }$		
Signature	D. DR	2	Ot Date Nov. 30. 20	100		

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TOTAL AMOUNT OF PAYMENT

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Complete if Known				
Application Number				
Filing Date				
First Named Inventor	Tam, et al.			
Examiner Name				
Group Art Unit				
Attorney Docket No.	821937600001			

METHOD OF PAYMENT	FEE CALCULATION (continued)					
1. X The Commissioner is hereby authorized to charge indicated fees and credit any overnaments to:	3. ADDITIONAL FEES					
indicated fees and credit any overpayments to: Deposit	Large Small Entity Entity					
Account Number 50–1432	Fee Fee Fee Fee Fee Description Fee	e Paid				
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— Glider S7 OTK 1.10 dild 1.17	139 130 139 130 Non-English specification					
Applicant claims small entity status. See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination					
2. X Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to					
X Check Credit card Money Other	Examiner action	-				
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action					
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month					
Large Entity Fee Fee Fee Pescription	116 390 216 195 Extension for reply within second month					
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 890 217 445 Extension for reply within third month					
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114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing					
CURTOTAL (4) (6) 255	138 1,510 138 1,510 Petition to institute a public use proceeding	——-				
SUBTOTAL (1) (\$) 355	140 110 240 55 Petition to revive - unavoidable					
2. EXTRA CLAIM FEES Fee from	141 1,240 241 620 Petition to revive - unintentional	—-				
Extra Claims below Fee Paid						
Total Claims	143 440 243 220 Design issue fee					
Claims	144 600 244 300 Plant issue fee					
Multiple Dependent 0 = 0	122 130 122 130 Petitions to the Commissioner					
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1.17(q)					
Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt					
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)					
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))					
104 270 204 135 Multiple dependent claim, if not paid	149 710 249 355 For each additional invention to be					
109 80 209 40 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))					
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)					
and over original patent	169 900 169 900 Request for expedited examination of a design application					
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SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	David B. Cochran		Registration No. (Attorney/Agent)	394142	Telephone	(216) 586-7029
Signature	David B.	Coch	ran		Date	Nov. 30, 2000